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PTO/SB/21 (08-03)

Approved for use through 08/30/03. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM		Application Number	10/651,450
		Filing Date	August 29, 2003
		First Named Inventor	Hiroto Itou
		Group Art Unit	3651
		Examiner Name	Patrick Hewey Mackey
Total Number of Pages in This Submission (excluding references)	8	Attorney Docket Number	47539.30

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Deposit Account 07-1850 Authorization	<input type="checkbox"/> Assignment Papers (pages) (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Postage Paid Return Postcard	<input type="checkbox"/> Drawing(s) In/Formal ___ Sheets with Submission of Drawings Transmittal	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Response (5 pages)	<input type="checkbox"/> Issue Fee Transmittal with PTO-85b (in duplicate)	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input checked="" type="checkbox"/> Amendment Transmittal Letter (in duplicate)	<input type="checkbox"/> Request for Continued Examination Transmittal (RCE)	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Fee Transmittal Form (in duplicate)	<input type="checkbox"/> Request for Status of Application
<input type="checkbox"/> Petition for Extension of Time (month) (in duplicate)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Information Disclosure Statement (in duplicate) with Form PTO-1449 and ___ References	<input type="checkbox"/> Terminal Disclaimer	
<input checked="" type="checkbox"/> Express Mail Label No. EV 337 971 758 US	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) ___	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

Remarks

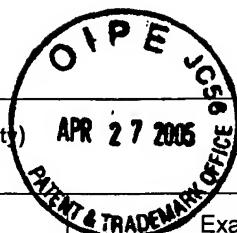
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

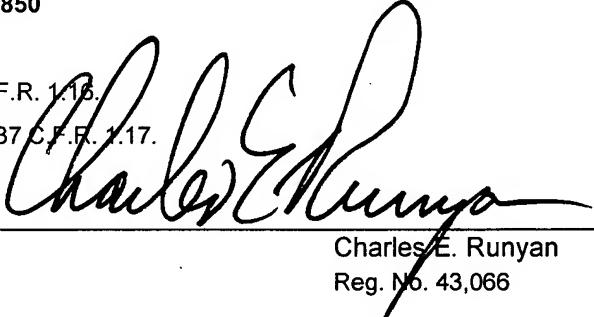
Firm or Individual name	Squire, Sanders & Dempsey L.L.P. Charles E. Runyan, Jr. P.I.D., Reg. No.43,066
Signature	
Date	April 27, 2005

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date:

Typed or printed name	Patricia Gamble		
Signature		Date	April 27, 2005



AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. 47539.30
Applicant(s): Hiroto Itou et al.					
Serial No. 10/651,450	Filing Date August 29, 2003	Examiner Patrick Hewey Mackey		Group Art Unit 3651	
Invention: Image Forming Apparatus Integrating Sheet Postprocessing Apparatus					
TO THE COMMISSIONER FOR PATENTS:					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as show below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	4	20	0	X \$50.00	\$00.00
INDEP. CLAIMS	1	3	0	X \$200.00	\$00.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$00.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$00.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. 07-1850 in the amount of \$00.00 A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge payment of any necessary fees associated with this communication or credit any overpayment to Deposit Account No. 07-1850 A duplicate copy of this sheet is enclosed. <input type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 C.F.R. 1.17.					
Dated: April 27, 2005 Squire, Sanders & Dempsey L.L.P. 1 Maritime Plaza, Suite 300 San Francisco, CA 94111 (415) 954-0200					
 Charles E. Runyan Reg. No. 43,066					
cc: Docket:					

4.29.05

PATENT
Attorney Docket No.: 47539.30

Ifw



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:	Examiner:
Hiroto Itou	Patrick Hewey Mackey
Serial No. 10/651,450	Art Unit: 3651
Filed: August 29, 2003	
Title: Image Forming Apparatus Integrating Sheet Postprocessing Apparatus	

Commissioner for Patents
USPTO
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO OFFICE ACTION

Dear Examiner Mackey:

This responds to the Office Action dated March 7, 2005.

Claim amendments begin at page 2.

Remarks begin at page 4.